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13281

UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	500.43384X00	
First Inventor	FUKUNARI, CHIHO	РТ)7
Title	METHOD AND SYSTEM FOR JUDGING RELIABILITY OF RESOURCES, AND PROGRAM FOR THE SAME	3 U.S.
Express Mail Label No.		108

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APPLICATION ELEMENTS SEE MPEP chapter 600 concerning utility patent application contents.		ADDRESS	TO: Comn P.O. E	I Stop Patent Application nmissioner for Patents D Box 1450 xandria VA 22313-1450		23			
(Submit aı	n origir	Form (e.g., PTO/SB/17) nal and a duplicate for fee processing) s small entity status.	 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission 						
See 37 CF		•		a. 🔲 Com	le, all necessar puter Readabl	e Form (CRF)		
3. Specificati		[Total Pages: 25] gement set forth below)		•	ion Sequence		opies); or		
-Descriptiv	ve title	of the invention to to Related Applications			☐ paper	,			
-Statemer -Referenc	arding Fed sponsored R & D equence listing, a table, program listing appendix		c. Statements verifying identity of above copies						
-Backgrou	ind of t	the Invention		AC	COMPANY	ING APPLI	CATION PARTS		
	criptio	of the Invention on of the Drawings (if filed)		9. Assi	gnment Paper	s (cover shee	et & documents(s))		
-Claim(s)	•	Disclosure		I .	FR 3.73(b) Sta en there is an a		Power of Attorney		
4. Drawing(s) (35 L	U.S.C. 113) [Total Sheets: 10]			ish Translatior	,	if applicable) Copies of IDS Cit	ations	
5. Oath or Declaration	n	[Total Sheets:	.1		ement (IDS)/P				
a Newly executed (original or copy)			K-21	I					
	•	rior application (37 CFR 1.63 (d))			rn Receipt Pos	•	•		
(for coi	ntinuat	tion/divisional with Box 18 completed)			ould be specific ified Copy of P	•			
i. DELETION OF INVENTOR(S)				15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
Signed statement attached deleting inventor(s)			16. Non	16. Nonpublication Request under 35 U.S.C. 122					
		in the prior application, see 37 CFR 2) and 1.33(b)		or its	?)(B)(i). Applic equivalent.	ant must atta	ch form PTO/SB/35		
6. Applicatio	n Data	a Sheet. See 37 CFR 1.76					ard Payment Form er 37 CFR 1.56 w/r		
18. If a CONTINU	ING A	APPLICATION, check appropriate be	ox, and sup			•			
or in an Applicatio	n Dat	ta Sheet under 37 CFR 1.76:							
Continuation Divisional Continuation-in-part (CIP) of prior application No.:									
Prior application information: Examiner: Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under									
Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
19. CORRESPONDENCE ADDRESS									
Customer Numb	oer	020457				or \square c	orrespondence addres	s below	
Name ANTONELLI, TERRY, STOUT & KRAUS, LLP									
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Address			-1			Г			
City			State			Zip Code			
Country		1	Telephone	(703) 312-6600	•	Fax	(703) 312-6666		
Name (Print/Type)	Me	elvin Kraus		Registration No. (A	Attorney/Agent	. 	22,466		
Signature	$\perp \!\!\! \perp \!\!\! \downarrow$	suh hun				Date	January 8, 2004		

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FEE TRANSMITTAL			Complete if Known							
			Application Number							
						January 8, 2004				
for FY 2004			First Named Inventor FUKUNARI, CHI							
Effective 10/01/2003. Patent fees are subject to annual revision.			er Nam	е						
☐ Applicant claims small entity status. See 37 CFR 1.27			Art Unit							
TOTAL AMOUNT OF PAYMENT (\$) 770.00		Attorney Docket No. 500.43384X00								
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METHOD OF PAYMENT (check all that apply)	_ _	-		FE	E CALCULATIO	ON (continued))	,		
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Deposit Account Antonelli, Terry, Stout & Kraus, LLP	Fee Cod	Fee e (\$)	Fee Code	Fee (\$)	Fee Descrip	otion				
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The Director is authorized to : (<i>check all that apply</i>) ☐ Charge fee(s) indicated below ☑ Credit any overpayments	1052	50	2052	25	Surcharge – late pro cover sheet	ovisional filing fee	or			
☑ Charge any additional fee(s) during the pendency of this application	1053	130	1053	130	Non-English specific	cation				
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FEE CALCULATION 1. BASIC FILING FEE			1805	1,840	Requesting publicat Examiner action	ion of SIR after				
Large Entity Small Entity	1251	110	2251	55	Extension for reply v	within first month				
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Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee 770.00	1253	950	2253	475	Extension for reply v	within third month				
1002 340 2002 170 Design filing fee	1254	1,480	2254	740	Extension for reply v	within fourth mont	h			
1003 530 2003 265 Plant filing fee	1255	2,010	2255	1,005	Extension for reply v	within fifth month				
1004 770 2004 385 Reissue filing fee	1401	330	2401	165	Notice of Appeal					
1005 160 2005 80 Provisional filing fee	1402		2402	165	Filing a brief in supp					
	1403 1451		2403	145	Request for oral hea	_				
SUBTOTAL (1) 770.00		•	1451		Petition to institute a		eding			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		110 1,330	2452 2453	55 665	Petition to revive – u Petition to revive – u					
Fee from Extra Claims below Fee Paid		1,330	2501	665	Utility issue fee (or r					
Extra Claims below Fee Paid Total Claims 8 -20** = 0 x 18 = 0	1501 1502		2502	240	Design issue fee	0.0000)				
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Claims	1406		1460	130	Petitions to the Corr	nmissioner		<u> </u>		
Multiple Dependent 290 = 0		50	1807	50	Processing fee unde	ocessing fee under 37 CFR 1.17(q)				
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1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission (37 CFR § 1.129(a))	after final rejection				
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims		770	2810	385	For each additional	invention to be				
over original patent		770	2801	385	examined (37 CFR §		BCE)			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1801 1802		1802	900	Request for Continu Request for expedite	-	NOL)			
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**or number previously paid, if greater, For Reissues, see above.			Basic Fil	ino Fee	Paid	SUBTOTAL (3) (\$)			
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SUBMITTED BY					Complete (if app	licable)				
Name (Print/Type) Melyin Kraus		stration No. mey/Agent) 22,466				Telephone 703-312-6600				
11. 19.22	<u>. </u>									
Signature VIII I						Date	01/08/200	4		

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